Interview with Dr. James H. Thomas of the 3rd Medical Battalion in Vietnam, 1967- 1968 who was at the Battle of Khe Sanh. Conducted by Jan K. Herman, Historian of the Navy Medical Department, Kansas City, MO, 9 September 2004.

Where are you from?

I'm from Ashland, Kentucky, which is located on the Ohio River, not very far from Huntington, West Virginia, about 150 east of Cincinnati.

Was there a tradition of medicine in your family?

Yes. My hero growing up was my mother's first cousin, who was a cardio-thoracic surgeon and a professor of surgery at the University of Iowa at the time I was in college and in medical school. Beyond that, I had a cousin who was a dentist. So, to a certain extent, there was a history of medicine and certainly a history of educators. My mother, my grandmother, and many of my relatives have been schoolteachers.

When did you decide you wanted to be a physician?

My initial goal was to become an artist. I had dreams of living on the Left Bank in Paris. But my father and I had a long talk when I went to college. He said, "Look, you're good but you're not that good so why don't you get a little more realistic about it." I had always been interested and done well in sciences. Biology was my major in college . . .actually biology and chemistry. In a relatively short time after being in college, based on my experiences with those individuals I just mentioned and my love of art and the biological sciences, I decided that medicine was the place for me.

So I applied to medical school after my sophomore year in college. I had attended Morehead State College in Morehead, Kentucky. After 2 years I applied and was accepted after my third year of college in the third class at the University of Kentucky School of Medicine.

I might just add that I finished high school at a school that is no longer in existence. This was the segregated South so it was Booker T. Washington High School. My father had graduated from there in a class of two, and I completed my education there in a class of six. My mother was one of the teachers.

So you had to behave yourself.

Very much so.

Did you a pre-med at Morehead?

Yes. Morehead was where I did my pre-medical years and then medical school at the University of Kentucky.

How did you find medical school?

Actually, it wasn't bad. Morehead State had a history of preparing people well for medical, dental, and veterinary educations. There were 21 of us who went off to one of those three colleges from Morehead who were all well prepared within a relatively short time. In fact, I finished in the upper third of my class. It just wasn't very difficult to begin with.

So you went through the usual subjects in medical school?

Yes. Initially, I breezed through them.

Initially?

Well, you get into these social issues. I fell in love during my freshman year in medical school and that took a lot of my time and effort. It turned out not to be successful and it sort of upset the apple cart to a certain extent, but it didn't destroy me. I was relatively young when I started medical school. There were five of us who were 20 years of age or under. I rebounded and finished medical school in good shape.

Did you decide at that point what you wanted to specialize in?

Very quickly. In the first 2 years, I thought I'd be a pathologist. I was a little uncomfortable dealing with people, talking to them, etc. But by the time I completed my first rotation, which was on surgery, there was no doubt in my mind what I was going to do. I would be a surgeon.

That was interrupted.

Well, let me tell you how it was interrupted. To me, it's very important that it be understood. I actually completed my internship at the University of Kentucky. At that time, the chairman of the department was very well known, Benjamin Eiseman. I wasn't very happy with Kentucky. I had become increasingly angry about a lot of the social issues, about where I was living, about how I was treated, etc., etc.

To a certain degree, Ben was empathetic with my problems. It got to the point where I was so irritated that I and a friend, Walt Drysdale, went to him about a month before I was to complete my internship and go on to do my residency--And I might add, that he was leaving at the time as well--and said to him, "I'm out of here. I can't do this any longer. I've decided to go somewhere, maybe Vietnam."

And he said, "Fine." He picked up the telephone and called [VADM] Bob Brown, who was the Surgeon General of the Navy at that time. Actually, I was already in the Navy as a reservist. I had been in the Berry Plan but gave it up because of my irritation with the social issues in the South.

Ben Eiseman got Walt and me an appointment very quickly in the Navy and I left as soon as I finished my internship in June of 1967.

Walt and I drove across the country in a 1956 Ford. We went down to Mexico and drove back up through Tijuana and San Diego, and finally ended up at Camp Pendleton.

You then went to the Field Medical Service School?

Absolutely. In some ways the experience was a little disappointing. In other ways it was fine. I didn't think they really took it seriously enough. I expected it to be more physically challenging. I expected to have a little bit more information about what war was all about because, as a GMO, I was going to end up a battalion surgeon. I also knew that I would probably be out in the bush. But I don't think they prepared us very well for that. It was a lot of fun and games.

I must admit that there was a Marine Corps sergeant named Tankerd, a Black guy about 6 foot 7. He was a gunny and had been in Vietnam. He kept warning us about how bad things were, etc.

But I don't think the program prepared us well enough. I'll give you a perfect example of what I mean. In the training, we fired M14s; we didn't fire M16s. We fired .45s and threw grenades. We did all these things. We did the Vietnamese village thing. But it was a very short, abbreviated course. I'll tell you what I mean. We got to Vietnam and I'm riding in a 6 by up to the areas that I'm responsible for as battalion surgeon. I was going out to join the 1st Battalion, 4th Marines. And the 6 by in front of us hits a land mine. Everybody jumps off the trucks, as you might well imagine. They get out on the side in the ditches because we assumed that there would be an ambush to follow. So everybody is locked and loaded, as I am. I also have this .45 in my hand and I'm locked and loaded.

Then it occurs to me, "Guess what? I've always fired a .45 until it's empty. I'd never taken a live round out of the chamber." And there I am with a .45. It's at least a hundred degrees. I'm wet and sweating and I have a live round in the chamber.

Now someone might say, "Well, Doc, you shouldn't have put a round in the chamber," but I'm just like everybody else. I don't know what's going on so I'm locked and loaded like everyone else.

I said to the PFC sitting next to me, "Hey, I think I'm going to take the clip out of this thing and fire the round."

He said, "Doc, don't do that."

I said, "Why?"

He said, "If you do that, they'll turn and blow us away. We will be dead right here where we sit. There's no doubt about it."

I hadn't thought about that. And so he said, "Let me have it." I took the magazine out and he then, very gingerly, pulled the slide back and ejected the round.

Had they taught you to field strip it?

Oh, yes. That was no problem. I could field strip it. But I was a medical student. I certainly grew up with weapons in my hometown. I had .22s and those things. But those were a little different. They just never showed me how to eject a live round from the chamber of a .45. So, I didn't think they prepared us as battalion surgeons for that part of it. And I don't think they prepared us adequately for the medical part of it either.

When I got out to my Marine battalion, I had no idea what I was supposed to do. So I put together my own processes, my own approaches, and that sort of thing. I found out what the guy had done before me and that's what I did. There were certain things I knew I had to do but, basically, in terms of what a battalion surgeon was supposed to do, it wasn't very clear.

So, the mission wasn't clear.

There was no book that said, "The battalion surgeon does the following . . ." There was nothing like that at all.

And no one to talk to.

No. You were it. By the time I got there, my predecessor was already gone. Fortunately, I had corpsmen. There were first class corpsmen and chiefs. If it hadn't been for chiefs, half of us wouldn't know what the hell we were supposed to do. But chiefs were never in the bush. They stayed back with the gear and the beer. Meanwhile, the first class corpsmen would go out and they were extremely helpful. If it weren't for the corpsmen and your camaraderie with them, you would have been in serious trouble. And, of course, the colonel always told you what he expected of you.

How did you get to Vietnam?

We flew from Travis to Okinawa where we were allowed to relax for a couple of days. They gave us a whole bunch of shots. You walked through the big lines with your drawers in a little bag and guys passed out and that sort of thing.

And then I flew from Okinawa to Danang. I got off the plane. I had no idea what to expect. You felt like there was a Vietnamese behind every bush waiting to kill you.

I walked across the tarmac, got aboard a 6 by and they took us to the officers' club and then someplace to sleep that evening. When I look back on that, the closest thing I can think of is "Platoon," when the guy got off the plane. That's what it reminds me of. I don't remember if I saw body bags or not; its been so long ago. But, I'll tell you, it seems like there were.

I think I stayed in Danang a day or two and that's when I met Dr. George Croft, the division surgeon for the 3rd Marine Division. He then assigned all of us to our units. Some went to medical battalions; others went to Marine battalions. I went to a Marine battalion--1st Battalion, 4th Marines.

Where were they headquartered at that time?

They were outside the city of Hué guarding a road at the time. At the most forward position there were 175s. At the time, they told me that they were shooting over into the A Shau Valley or somewhere near there. They were guarding two gun bases so I had to make trips up and down that road to make sick call.

What year was this?

July of '67.

Did you see a lot of casualties?

What I saw were the people who were ambushed going between the outposts along that road. I saw some pretty gruesome things along the way. One of the first casualties I saw was an RPG round that had gone through a tank and ignited inside and made a crispy critter out of one of the Marines.

From there we went to Camp Evans which was farther north of Hué. From there we made a lot of battalion size and smaller operations in the area going as far north as Quang Tri and Conthien.

The first time I was involved in a major conflict with the NVA was outside Camp Evans. We had been on a battalion size operation during the monsoon and got hit pretty badly. We didn't have any rain gear and it was cold and miserable. We took a lot of casualties that night. The canopy was a hundred feet and we couldn't bring any helicopters in mainly because we were taking a lot of fire that night. There was a concern about getting overrun. A lot of kids died that night. I had a bomb crater full of dead and dying.

Did you have anyone helping you?

It was just the corpsman and me. We carried everything we needed into the field on our backs. We provided what care we could and that was not . . .

What kind of gear were you carrying?

We carried the usual bandages and also Ringer's lactate and needles to start IVS. Now they have the Ringers lactate in plastic. We carried glass bottles. But it was up to me to decide how much I needed to take. But what did I know? I had no training to tell me what to expect out there. Some of the corpsmen had been in combat before and so they were extremely helpful. And we were able to take sufficient supplies to keep people alive. But we also knew that if we didn't get people out soon, they were going to die. And sometimes we couldn't get them out soon enough.

Tell me about Khe Sanh.

I came back from Conthien, through C2, and Cam Lo, and also Dong Ha. I was sitting in the airport in Dong Ha waiting to fly down to Phu Bai. I looked over and saw this guy. I noticed that he had his medical insignia and bars on. Obviously out in the bush you didn't wear any kind of insignia so I had nothing on. I said, "Hey man, you got a cigarette?"

He said, "Marine. . ."

"Hey, man, I'm not a Marine." I reached in my pocket and pulled out my bars and my medical insignia. That guy eventually turned out to be my best man when I got married. His name is Roberto Jimenez. He's a psychiatrist and currently lives in San Antonio. Bob and I formed a very

close relationship. He had just been out at another place where they'd been overrun. So we were at Phu Bai together.

There were three types of physicians in Vietnam: People who had been in the bush, and most of them were GMOs. There were people who had never been in the bush and were specialists. They were older and sort of kept to themselves. And there was the other group--the lifers, the guys who were regular Navy. We usually stuck with our own little groups.

I was a senior GMO because I had had some experience. We were handling the triage area and operating. CDR Bob Brown, who was the head of Alpha Med at Phu Bai, decided that since I had so much experience that he was going to send me to Khe Sanh. That's where I met Ed [Feldman]. It was a pretty relaxed place when I got there. I was assigned to Charlie Med. My job--and everybody's job--was to take care of the casualties when they came in.

What was your impression of Khe Sanh when you got there?

As far as a base goes, it was a pretty raggedy place. I was not impressed with it as a stronghold at all. I had been in several locations--Quang Tri, Cam Lo. I had been in places where people had built some very sophisticated bunker systems--nice and neat. This place looked like it had been thrown together. Don't get me wrong. People had bunkers but the bunker system didn't impress me the way the usual Marine bunker systems did. I thought that if they hit us we would be in trouble. You could look out and see mountains all around. From a strategic standpoint it didn't look too cool.

When I arrived at Charlie Med, I had a jungle hut. There was one small bunker, but when I had to take care of patients, I had to go upstairs to the hut. And I didn't do that standing up. Most commonly, I took care of them lying down.

Tell me the story of how you and Ed Feldman delivered the baby.

There was a Cambodian woman who was having a difficult labor. They sent her to us. She had meconium-stained amniotic fluid. There in this tent, Ed and I delivered her. Ed, of course, knew all about this stuff. I had done some deliveries myself. The child was limp and not breathing. We resuscitated the child, got the kid all wrapped up, and mom and child left on a helicopter. We were really pleased with ourselves.

What do you recall about the day the heavy incoming began, January 21st?

I had decided to sleep in the bunker that night, and at 5 o'clock in the morning we took our first round. I think by noon we had taken a thousand rounds.

That famous photograph of you taking care of a casualty. Did that take place about that time?

Yes, it did.

What were the circumstances of the photo?

It was a day just like a lot of the days up there. This kid came in with a bad injury to his jaw. It was pretty obvious that he had an obstructed airway and that we would have to do a tracheostomy. We were in that jungle hut or hooch at the time, he was on a stretcher, and I was on my knees. I did what I had learned to do as an intern, that is do a tracheostomy. I don't know whether he survived or not; I just don't remember but the operation went very well. A first class corpsman helped me.

I don't actually recall the picture being taken. I saw it in *Stars and Stripes* while I was in 'Nam but I don't know who took it. Photographers were around all the time and many of them were just Marine Corps photographers.

So this photo was taken toward the beginning of the siege before you had an opportunity to burrow into a deeper bunker.

Exactly. I never got the opportunity to burrow in. Jim [Finnegan] and Ed [Feldman] got that opportunity. The whole time I was there, I was upstairs. The hooch was sandbagged to a certain level. In case anything hit adjacent to it, the sand bags at least would prevent shrapnel from harming people.

So all these shells are coming in, and you're taking care of casualties topside.

Yes. Doing what I had to do. These hooches had canvas on the sides and slabs of wood. There was lots of debris from artillery--shrapnel from rounds, rockets. That stuff was all over the place and zinging all around us while we worked. You never knew whether you were going to get hit or not. On a number of occasions, guys would bring their wounded buddies in and then walk out and get blown away.

Was any of this frightening? It's difficult to say that because when you were doing what you had to do, you didn't pay much attention. You were young and bulletproof and had to take care of these people. Nevertheless, at times the shelling was so heavy that we treated casualties on our knees or lying down.

Did your circumstances eventually improve as far as being able to practice halfway decent medicine? Did you dig a bunker?

Circumstances eventually improved but not while I was there. I was above ground the whole time I was there. In fact, they brought in a surgeon because they were worried that I didn't have the skills to handle things. He lasted about 48 hours before going back because of the severity of the shelling.

It's difficult to remember now how frequently those rounds came in but I can assure you they came in frequently.

Is there any time you spent at Khe Sanh that stands out in your mind as being particularly hellish?

We felt like we were going to be overrun every day, every night, every minute. The shelling was intense constantly but it reached a level that we soon adjusted to. We were constantly hearing rumors about so and so went out today and didn't come back. The perimeter was being checked constantly. I remember a few things. One concerned a Marine Corps pilot. He was dropping napalm when his plane was hit. He came down inside the perimeter. They brought him to me at Charlie Med and he was pretty shaken up but not seriously hurt. We shared some medicinal brandy in the bunker.

While all this was going on and you were under constant siege, did you guys ever discuss why the hell you were there?

I think those discussions were held not only before going there, but while there, after leaving there, and even after leaving Vietnam. But I do think that what happens to you is that the people around you become so important that you feel like it's a waste of energy to talk about why you were there. It was better to use your energy to take care of these folks and you didn't want to do anything to prevent you from focusing on your job. It's a camaraderie that exists and it prevents you from discussing those sort of things.

When you say camaraderie, are you referring to your fellow medical personnel?

Even before I went out there, the corpsmen and I did a lot of things together. There was a kid from Springfield, Massachusetts. He was a basketball player. We put a metal canister halfway across the room and would shoot little stoppers at it constantly.

So you developed these relationships with these guys and they became very important people.

At the time, I recall reading about Khe Sanh and how importantly strategic LBJ thought it was. Because of where it was located and the fact that you were under siege, there were many, including Johnson, who saw a parallel with what the French experienced at Dien Bien Phu. Did you ever think of the parallels between the two situations?

We were very much aware of the possible parallel between Dien Bien Phu and Khe Sanh. Everyone was very much aware of that. And I think it influenced our behavior as well in terms of making people steel their will to a great extent.

Would there have been something like a typical day at Charlie Med?

You'd wake to the sound of gunfire and mortars. You'd clean yourself up, grab something to eat, and wait for the first casualties.

Where did you eat?

We ate C-rats where we were. We used to spice them up with all sorts of things.

What was the level of medicine you could practice at Khe Sanh?

What limited the ability of anyone to provide care was some sort of facility where you were safe. Eventually, they built a bunker underground. You also needed people who could provide the kind of support that would allow you to intervene to save people's lives.

To do this, you had to be able to provide blood. You also had to be able to operate in a safe circumstance. Then you had to be able to get people out as quickly as possible--those whose injuries you couldn't take care of and those whom you had operated on who needed further support. This meant you had to have a way of moving patients fairly quickly.

I remember how we got people in and out of Khe Sanh. The C-130 would come and taxi down the runway, never stopping. Then we'd run out with stretchers and load them in the back, and then they would get out. If there was really heavy incoming, the C-130s just wouldn't come in. A number of them had been hit and pushed off to the side.

The kind of medicine I could provide was limited by my knowledge and experience and by the circumstances of not having those support systems I just mentioned.

By the time you arrived at Khe Sanh, were you secure in your abilities? You were no longer the boot who came to Vietnam.

I had a lot of experience by that time.

Did you have any help besides the corpsmen, or were you it at Charlie Med?

I was it. Ed [Feldman] was there but was with a battalion and separated from where I was. We talked on the telephone and waved at each other. That was pretty much it. We didn't take that little trip. It was about 200 meters, maybe a little further. And there was too much stuff going down. We couldn't visit.

So making a trip between Charlie Med and Ed's battalion at that other part of the base was too dangerous.

Oh, yes. That would have been a very serious mistake. There were snipers and all kinds of activity.

So while you were at Khe Sanh, you didn't move very far in any direction.

I never moved further than 200 feet. That was my world--a very small world. The bunker and the hooch. That was pretty much it.

How long were you at Khe Sanh altogether?

I think it was about 3 weeks.

But it must have seemed like 3 years.

It seemed like a very, very long time. I got back in time for the siege of Hué.

How did you get out?

On one of those C-130s. I ran, jumped in the back of one, and hoped I wouldn't get hit.

Where did you go from there?

I went back to Alpha Med at Phu Bai thru Dong Ha. I arrived there shortly after the siege of Hué began.

That was during Tet.

Yes. In January or February.

What do you remember about Tet?

There were a lot of casualties at A Med. Thousands of casualties. There were also a lot of captured NVA and VC. We had a theater out back and it was full of them. They let me operate on the NVA and VC. I was the surgeon, which was a pretty good deal for me. We worked day and night, day and night, just sleeping as we could.

It was a very well organized medical battalion. The guys were excellent physicians and the patients got good care to the extent that we were able to provide. We didn't have any ventilators. We had one little Bird machine. We had no neurosurgeons so if you had a ding to the head you didn't get any care for that. In general, we got people through very, very quickly. We got them to the operating room very promptly, and I think we did a good job with all the surgical interventions that were necessary.

So, you were very busy, then?

It was so busy during Tet that the C-130s landed twice a day to take people out because we only had so many beds and new casualties were constantly coming in.

The siege of Hué was the generator of all these casualties.

Yes. They brought in people who knew each other. What I mean by that is there were not 1 or 2, but 10 or 12. All these guys were in the same outfit. We also brought in scouts with dogs, and that was a problem. When you had a German Shepherd and he was attached to the scout, and the guy was injured, you couldn't even touch him. So we had people there to handle the dogs so we could deal with these people.

Did you know what was going on with the fighting?

We were receiving information about what was going on from the Marines who were coming in. We learned that this was very difficult, tough fighting and that tremendous numbers of people

were dying. They brought a lot of the dead back to us and we had to go through and find cause of death as well. There were a great number of body bags going through A Med at that time.

How did you hear that Tet had begun?

All of a sudden we were getting this tremendous number of casualties and people were saying, "What the hell's going on?" And then it became very apparent. We got the information through word of mouth. We may have had some meetings where CDR Brown said, "There's a major offensive by the NVA and VC all over the country." We may have heard it on Armed Forces Radio. I don't remember. But it was very clear that something very unusual was going on simply because security was tightened. And another thing. Any time something was going to happen, our Vietnamese help disappeared. They just would not show up for work. So we knew that something was going on. And there were a lot of captured NVA as well.

You mentioned earlier that you were allowed to operate on enemy prisoners. I gather that they wouldn't allow you to do surgery on our own men.

I usually had to operate with other surgeons. With the NVA and VC, I was the primary surgeon and the surgeons would help me. I also operated on Vietnamese civilians. I even operated on one ROK [Republic of Korea] at least.

I remember doing a brachial artery repair on an NVA. The guy who helped me do it was an Army surgeon. During Tet, the 101st Airborne came in and brought their surgeons with them. In fact, the guy who helped me had trained in Boston at BU [Boston University]. He knew I was interested in surgery and he helped me do the operation. I remember taking the vein out of the guy's leg and putting it in his arm.

Did you use the saphenous vein?

Yes. And he had a good pulse. It worked out very well.

It's been said many times, that war has brought great advances in medicine, surgery in particular.

Actually, the Navy was pretty good about that sort of thing. I don't remember having any limitations on what we could do medically to take care of patients. But the reservists are typically the guys who do that kind of stuff.

So you did a little vascular surgery. Is that what got you interested in that specialty?

I think so. I really enjoyed it and it was very rewarding. I really felt it was something I was best suited for.

What happened after Tet and Hué?

I stayed in Vietnam until August and things slowed down considerably after Tet. I think the NVA and the VC, while they inflicted a significant amount of pain, also suffered tremendously from that engagement. We didn't have a lot of action for a while. I think I went up to Dong Ha at one time during that era and maybe that was the time the ammunition dump was hit there. Then I came down to Phu Bai again and did the usual injury sort of thing. Nothing exciting happened.

I eventually got to Danang and lay on the floor waiting to get out of that damn place.

You were scheduled to leave anyway.

Yes. I finally got out on a C-130 and flew back to Okinawa.

How much longer were you in the Navy after you returned from Vietnam?

Another year. I spent that year at Chelsea Naval Hospital in Boston. I found it interesting coming back to the USA. I remember landing at the LA Airport. I was in uniform and hadn't been out of Vietnam a week. I'm sitting there drinking and thinking about going back home and wondering if I really wanted to do that.

There were some people in the booth next to me talking. About what? They were saying, "Did you see the gown that she had on last night and how horrible it was?"

I completely freaked out and had all I could do to keep from standing up and shouting, "What in the hell is wrong with you people? Don't you realize what's going on somewhere on the other side of the world?" And that was my introduction to the States.

I flew from LA to Cincinnati and then took a cab from there to Lexington--a cab! It shows you what kind of state I was in. I went home after that and it was a real tough transition period. I wasn't tremendously aware of it at the time but my parents and my sister were. I think I kept to myself a lot during that initial 30 days--the time I was on leave until I went to Boston. Even when I got to Boston I was pretty much in a different frame of mind. I'm not sure exactly how long it took to get back to what would be considered an acceptable frame of mind. Somewhere in the next few years things began to make a lot more sense.

Did you find yourself jumping at loud noises?

Yes. That happened up at Chelsea Naval in what was called the geedunk. Some of us who had been in 'Nam were eating . . . Above us was a storage area. Suddenly someone dropped something and everybody--the ones who had been in 'Nam--hit the deck. People thought that was funny but we didn't find it so funny.

I got my Bronze Star for Khe Sanh. But they presented it to me at Chelsea and I had a very difficult time with that because what did these guys know? Someone who had been at Khe Sanh should have been presenting me with this.

I felt I had been mistreated at Chelsea but, as you've heard, that's not an uncommon fate for a reservist who comes back and goes to a hospital. At least it was then; maybe it's not that way now. I ended up as a GMO holding sick call. Here I had had all this experience in Vietnam and they wouldn't let me do anything.

Well, it's been over 35 years since all that. Do you think about it much any more?

I think about it more now than I used to. It may be because I'm older. It may be because of this recent foray into Iraq. I think it may be because I'm now far enough away to reflect on it and understand what it was all about. I think about it more now than ever before. The experience definitely shaped my career not only from the standpoint of what I wanted to do but also from the people I met back then.

I can see the affection you and your buddies have for one another. You guys went through an experience together. They say there's nothing that brings people closer than the experience of war.

I know that's true. To a great extent, when you get into that situation, you learn what people are really all about. You find out who the good guys are, who the courageous guys are, and who the fools are, too. All of a sudden, the issues of ethnicity, religion, etc. don't mean a damn thing.

I want to share one more thing. I remember the first time we really got hit bad. We had all these casualties and people were moaning and groaning and I was running around doing everything I could do. And it became very apparent that I was not going to save all these guys.

I remember a first lieutenant who had this little ding in his chest. It was tiny, about this big. Let me tell you, little dings can kill you just as sure as big dings. It had entered his chest and must

have made a hole in his ventricle. He and I sat there and talked while he was dying. I felt totally helpless. And he finally died.

I looked around and saw these other kids, all of whom were injured badly. Some were dying. And there was a pretty vicious fire fight going on not very far away and occasional rounds were coming through. The chaplain and I got together and sat down. I'll tell you. It was not a religious moment but a moment of release because it was a very tough situation that night. The both of us sat there and broke down for a couple of minutes. I had only been in Vietnam a short time and this was my introduction. That's pretty tough for a kid.

Thanks for sharing all this with me.

It's good to talk to you.